

TRANSMITTAL LETTER
2020-2024 Four Year Area Plan/ Annual Update
Check one: FY 20-24 FY 21-22 FY 22-23 FY 23-24

AAA Name: San Bernardino County Department of Aging and Adult Services PSA 20

This Area Plan is hereby submitted to the California Department of Aging for approval. The Governing Board and the Advisory Council have each had the opportunity to participate in the planning process and to review and comment on the Area Plan. The Governing Board, Advisory Council, and Area Agency Director actively support the planning and development of community-based systems of care and will ensure compliance with the assurances set forth in this Area Plan. The undersigned recognize the responsibility within each community to establish systems in order to address the care needs of older individuals and their family caregivers in this planning and service area.

1. Curt Hagman
(Type Name)


Signature: Governing Board Chair ¹

APR 26 2022
Date

2. David Wilder
(Type Name)


Signature: Advisory Council Chair

4/14/2022
Date

GLENDIA JACKSON FOR

3. Sharon Nevins
(Type Name)


Signature: Area Agency Director

4/14/2022
Date

¹ Original signatures or official signature stamps are required.

Check one: FY21-22 FY 22-23 FY 23-24
 Use for APUs only

AP Guidance Section	APU Components (To be attached to the APU)	Check if Included	
	➤ Update/Submit A) through G) ANNUALLY :		
n/a	A) Transmittal Letter- (submit by email with electronic or scanned original signatures)	<input checked="" type="checkbox"/>	
n/a	B) APU- (submit entire APU electronically only)	<input checked="" type="checkbox"/>	
2, 3, or 4	C) Estimate- of the number of lower income minority older individuals in the PSA for the coming year	<input checked="" type="checkbox"/>	
7	D) Public Hearings- that will be conducted	<input checked="" type="checkbox"/>	
n/a	E) Annual Budget	<input checked="" type="checkbox"/>	
10	F) Service Unit Plan (SUP) Objectives and LTC Ombudsman Program Outcomes	<input checked="" type="checkbox"/>	
18	G) Legal Assistance	<input checked="" type="checkbox"/>	
	➤ Update/Submit the following only if there has been a CHANGE or the section was not included in the 2020-2024	Mark Changed/Not Changed (C or N/C)	
5	Minimum Percentage/Adequate Proportion	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5	Needs Assessment	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9	AP Narrative Objectives:	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9	• System-Building and Administration	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9	• Title IIIB-Funded Programs	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9	• Title IIIB-Transportation	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9	• Title IIIB-Funded Program Development/Coordination (PD or C)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9	• Title IIIC-1	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9	• Title IIIC-2	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9	• Title IIID	<input type="checkbox"/>	<input checked="" type="checkbox"/>
20	• Title IIIE-Family Caregiver Support Program	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9	• HICAP Program	<input type="checkbox"/>	<input checked="" type="checkbox"/>
12	Disaster Preparedness	<input checked="" type="checkbox"/>	<input type="checkbox"/>
14	Notice of Intent-to Provide Direct Services	<input type="checkbox"/>	<input checked="" type="checkbox"/>
15	Request for Approval-to Provide Direct Services	<input type="checkbox"/>	<input checked="" type="checkbox"/>
16	Governing Board	<input checked="" type="checkbox"/>	<input type="checkbox"/>
17	Advisory Council	<input checked="" type="checkbox"/>	<input type="checkbox"/>
21	Organizational Chart(s)	<input checked="" type="checkbox"/>	<input type="checkbox"/>

San Bernardino County Area Agency on Aging
Planning and Service Area 20
2022 – 2023 Area Plan Update

Table of Contents

Area Plan (AP) Checklist: Submit with the Four-Year AP due 5/1/20.....	3
Area Plan Update (APU) Checklist: <i>Submit with APUs due 5/1/21, 5/1/22, 5/1/23</i>	3
Transmittal Letter	4
Section 2. Description of the Planning and Service Area (PSA)	5
Section 7. Public Hearings	6
Section 10. Service Unit Plan (SUP) Objectives	8
Section 12. Disaster Preparedness	33
Section 13. Priority Services	35
Section 16. Governing Board	36
Section 17. Advisory Council	37
Section 18. Legal Assistance	39
Section 21. Organization Chart	43
Section 22. Assurances	44

SECTION 2. DESCRIPTION OF THE PLANNING AND SERVICE AREA (PSA)

The demographic information detailed below comes from a variety of sources including the US Census and the State of California. Detailed information on the Elder Economic Security Index is provided by UCLA Center for Health Policy Research.

2021 California Department of Aging Population Demographic Projections for San Bernardino County

The latest available data from California Department of Aging was prepared in 2021 as part of the Intrastate Funding Formula (IFF).

	Population 60+	Non-Minority 60+	Minority 60+	Low Income 60+	Medi-Cal Eligible 60+
Number of Persons	392,687	179,727	212,960	53,695	91,210
Percent of California 60+ Population	4.56%				
Percent of SB County Population 60+	N/A	45.76%	54.23%	13.67%	23.23%

Total California population 60+ = 8,620,949

	Geo. Isolation 60+	SSI/SSP 65+	Population 75+	Lives Alone 60+	Non-English 60+
Number Of Persons	21,182	25,872	102,262	58,555	18,125
Percent of SB County Population 60+	5.39%	6.58%	26.04%	14.91%	4.61%

Source: California Aging Population Demographic Projections for Interstate Funding Formula <https://aging.ca.gov/Data and Reports/>

From 2019 to 2022, the 60+ population for the IFF for the County has increased by 13.4%. Based on the United States Census Bureau, as of 2020, 16.9 % of the population in San Bernardino consisted of adults 60 and older.

SECTION 7. PUBLIC HEARINGS

PSA 20

At least one public hearing must be held each year of the four-year planning cycle. CCR Title 22, Article 3, Section 7302(a)(10) and Section 7308, Older Americans Act Reauthorization Act of 2016, Section 314(c)(1).

Fiscal Year	Date	Location	Number of Attendees	Presented in languages other than English?² Yes or No	Was hearing held at a Long-Term Care Facility?³ Yes or No
2020-2021	March 12, 2020	784 E. Hospitality Ln. San Bernardino, CA	13	No	No
2021-2022	March 17, 2021	784 E. Hospitality Ln. San Bernardino, CA via WebEx	42	No	No
2022-2023	March 16, 2022	784 E. Hospitality Ln. San Bernardino, CA via WebEx	51	No	No
2023-2024					

The following must be discussed at each Public Hearing conducted during the planning cycle:

1. Summarize the outreach efforts used in seeking input into the Area Plan from institutionalized, homebound, and/or disabled older individuals.

In the weeks leading up to the Public Hearing, representatives of DAAS attended Regional Council on Aging (RCA) meetings and provided a summarized presentation of the Area Plan Update. Surveys were also distributed at Long Term Care facilities by the local Long-Term Care Ombudsman program staff.

2. Were proposed expenditures for Program Development (PD) or Coordination (C) discussed?

Yes. Go to question #3

Not applicable, PD and/or C funds are not used. Go to question #4

3. Summarize the comments received concerning proposed expenditures for PD and/or C
N/A

4. Attendees were provided the opportunity to testify regarding setting minimum percentages

² A translator is not required unless the AAA determines a significant number of attendees require translation services.

³ AAAs are encouraged to include individuals in LTC facilities in the planning process, but hearings are not required to be held in LTC facilities.

of Title III B program funds to meet the adequate proportion of funding for Priority Services

Yes. Go to question #5

No, Explain:

5. Summarize the comments received concerning minimum percentages of Title IIIB funds to meet the adequate proportion of funding for priority services.

Attendees were provided opportunity to give feedback regarding all areas of the Area Plan Update. There was no specific discussion or feedback regarding setting minimum percentages of Title III B program.

6. List any other issues discussed or raised at the public hearing.

No other issues were brought up during the public hearing.

7. Note any changes to the Area Plan that were a result of input by attendees.

N/A

SECTION 10 - SERVICE UNIT PLAN (SUP) OBJECTIVES

**TITLE III/VIIA SERVICE UNIT PLAN OBJECTIVES
CCR Article 3, Section 7300(d)**

The Service Unit Plan (SUP) uses the National Aging Program Information System (NAPIS) Categories and units of service. They are defined in the NAPIS State Program Report (SPR).

For services not defined in NAPIS, refer to the Service Categories and Data Dictionary.

1. Report the units of service to be provided with **ALL funding sources**. Related funding is reported in the annual Area Plan Budget (CDA 122) for Titles IIIB, IIIC-1, IIIC-2, IIID, and VIIA. Only report services provided; others may be deleted.

Personal Care (In-Home)

Unit of Service = 1 hour

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	150	3	1, 2, 3
2021-2022	150	3	1, 2, 3
2022-2023	150	3	1, 2, 3
2023-2024			

Homemaker (In-Home)

Unit of Service = 1 hour

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	1,200	3	1, 2, 3
2021-2022	1,200	3	1, 2, 3
2022-2023	1,500	3	1, 2, 3
2023-2024			

Chore (In-Home)

Unit of Service = 1 hour

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	1,000	3	1, 2, 3
2021-2022	1,000	3	1, 2, 3
2022-2023	1,000	3	1, 2, 3
2023-2024			

Home-Delivered Meal**Unit of Service = 1 meal**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	360,000	3	1, 2, 3
2021-2022	360,000	3	1, 2, 3
2022-2023	375,000	3	1, 2, 3
2023-2024			

Adult Day/ Health Care (In-Home)**Unit of Service = 1 hour**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	150	3	1,2,3
2021-2022	0	0	0
2022-2023	150	3	1,2,3
2023-2024			

Case Management (Access)**Unit of Service = 1 hour**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021			
2021-2022			
2022-2023			
2023-2024			

Assisted Transportation (Access)**Unit of Service = 1 one-way trip**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	11,000	3	1,2,3
2021-2022	11,000	3	1,2,3
2022-2023	11,000	3	1,2,3
2023-2024			

Congregate Meals**Unit of Service = 1 meal**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	312,600	3	1, 2, 3
2021-2022	312,600	3	1, 2, 3
2022-2023	312,600	3	1, 2, 3
2023-2024			

Nutrition Counseling**Unit of Service = 1 session per participant**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021			
2021-2022			
2022-2023			
2023-2024			

Transportation (Access)**Unit of Service = 1 one-way trip**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	80,000	3	1, 2, 3
2021-2022	80,000	3	1, 2, 3
2022-2023	90,000	3	1, 2, 3
2023-2024			

Legal Assistance**Unit of Service = 1 hour**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	5,000	3	1, 2, 3
2021-2022	5,000	3	1, 2, 3
2022-2023	5,000	3	1, 2, 3
2023-2024			

Nutrition Education

Unit of Service = 1 session per participant
Unit of Service (effective 10/01/21) = 1 session

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	10,000	3	1, 2, 3
2021-2022	10,000	3	1, 2, 3
2022-2023	50	3	1, 2, 3
2023-2024			

Information and Assistance (Access)

Unit of Service = 1 contact

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	30,000	3	1, 2, 3
2021-2022	30,000	3	1, 2, 3
2022-2023	30,000	3	1, 2, 3
2023-2024			

Outreach (Access)

Unit of Service = 1 contact

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	14,000	1	1-5
2021-2022	14,000	1	1-5
2022-2023	15,000	1	1-5
2023-2024			

2. NAPIS Service Category – “Other” Title III Services

- Each **Title IIIB** “Other” service must be an approved NAPIS Program service listed on the “Schedule of Supportive Services (III B)” page of the Area Plan Budget (CDA 122) and the CDA Service Categories and Data Dictionary.
- Identify **Title IIIB** services to be funded that were not reported in NAPIS categories. (Identify the specific activity under the Other Supportive Service Category on the “Units of Service” line when applicable.)

Title IIIB, Other Priority and Non-Priority Supportive Services

For all Title IIIB “Other” Supportive Services, use the appropriate Service Category name and Unit of Service (Unit Measure) listed in the CDA Service Categories and Data Dictionary.

- ❑ **Other Priority Supportive Services include:** Alzheimer’s Day Care, Comprehensive Assessment, Health, Mental Health, Public Information, Residential Repairs/Modifications, Respite Care, Telephone Reassurance, and Visiting
- ❑ **Other Non-Priority Supportive Services include:** Cash/Material Aid, Community Education, Disaster Preparedness Materials, Emergency Preparedness, Employment, Housing, Interpretation/Translation, Mobility Management, Peer Counseling, Personal Affairs Assistance, Personal/Home Security, Registry, Senior Center Activities, and Senior Center Staffing

All “Other” services must be listed separately. Duplicate the table below as needed.

Other Supportive Service Category

Unit of Service

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021			
2021-2022			
2022-2023			
2023-2024			

Title IIIB, Other Supportive Services Category

Residential Repairs /Modifications

Unit of Service = 1 Modification

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	100	3	1, 2, 3
2021-2022	100	3	1, 2, 3
2022-2023	100	3	1, 2, 3
2023-2024			

Senior Center Activities

Unit of Service = 1 Hour

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	6,750	3	1, 2, 3
2021-2022	0	0	0
2022-2023	6,750	0	1,2,3
2023-2024			

Cash/Material Aid**Unit of Service = 1 Assistance**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	350	3	
2021-2022	350	3	
2022-2023	350	3	
2023-2024			

Community Education**Unit of Service = 1 Activity**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	400	1	
2021-2022	400	1	
2022-2023	400	1	
2023-2024			

Housing**Unit of Service = 1 Hour**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	250	3	
2021-2022	250	3	
2022-2023	250	3	
2023-2024			

Interpretation/Translation**Unit of Service = 1 Contact**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	3,000	3	
2021-2022	3,000	3	
2022-2023	3,000	3	
2023-2024			

Mobility Management Activities**Unit of Service = 1 Hour**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	600	3	
2021-2022	600	3	
2022-2023	600	3	
2023-2024			

Personal Affairs Assistance**Unit of Service = 1 Contact**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	1,550	3	
2021-2022	1,550	3	
2022-2023	1,550	3	
2023-2024			

3. Title IIID/Health Promotion—Evidence Based

- Provide the specific name of each proposed evidence-based program.

Unit of Service = 1 contact

Evidence-Based Program Name(s): The “Walk with Ease” evidence-based program will be at a minimum of two sites throughout the County. Each class is six weeks and 3 times per week.

The “Walk with Ease” program is listed on the National Council on Aging website as a Title III-D Highest Tier Evidence-Based Health Promotion/Disease Prevention Program as referenced in Program Memo 15-10. According to the Arthritis Foundation, participants in the “Walk with Ease” program experienced decreased disability; improvements in levels of pain, fatigue, stiffness and self-confidence; and better perceived control over arthritis, balance, strength and walking pace.

Evidence-Based Program Name(s): The “Bingocize” evidence-based program will be at a minimum of two sites throughout the County and offered remotely via Zoom. Each class is ten weeks and 2 times per week.

The “Bingocize” program is listed on the National Council on Aging website as a Title III-D Highest Tier Evidence-Based Health Promotion/Disease Prevention Program as referenced in Program Memo 15-10. Bingocize provides a health education program that incorporates exercise, nutrition, and falls prevention within the game of bingo.

Evidence-Based Program Name(s): The Chronic Disease Self-Management Education and Tai Chi For Arthritis evidence-based programs will be offered at a minimum of two sites throughout

the County and offered remotely via Zoom.

Both courses are listed on the National Council on Aging website as a Title III-D Highest Tier Evidence-Based Health Promotion/Disease Prevention Program as referenced in Program Memo 15-10.

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (If applicable)
2020-2021	850	1	3
2021-2022	0	0	0
2022-2023	700	1	3
2023-2024			

TITLE IIIB and Title VIIA:
LONG-TERM CARE (LTC) OMBUDSMAN PROGRAM OUTCOMES

2020-2024 Four-Year Planning Cycle

As mandated by the Older Americans Act Reauthorization Act of 2016, the mission of the LTC Ombudsman Program is to seek resolution of problems and advocate for the rights of residents of LTC facilities with the goal of ensuring their dignity, quality of life, and quality of care.

Each year during the four-year cycle, analysts from the Office of the State Long-Term Care Ombudsman (OSLTCO) will forward baseline numbers to the AAA from the prior fiscal year National Ombudsman Reporting System (NORS) data as entered into the Statewide Ombudsman Program database by the local LTC Ombudsman Program and reported by the OSTLCO in the State Annual Report to the Administration on Aging (AoA).

The AAA will establish targets each year in consultation with the local LTC Ombudsman Program Coordinator. Use the yearly baseline data as the benchmark for determining yearly targets. Refer to your local LTC Ombudsman Program's last three years of AoA data for historical trends. Targets should be reasonable and attainable based on current program resources.

Complete all Measures and Targets for Outcomes 1-3;

Outcome 1. The problems and concerns of long-term care residents are solved through complaint resolution and other services of the Ombudsman Program. Older Americans Act Reauthorization Act of 2016, Section 712(a)(3), (5)]

Measures and Targets:

A. Complaint Resolution Rate (NORS Element CD-08) (Complaint Disposition).

The average California complaint resolution rate for FY 2017-2018 was 73%.

<p>1. FY 2018-2019 Baseline Resolution Rate: Number of complaints resolved <u>951</u>+ number of partially resolved complaints <u>132</u> divided by the total number of complaints received <u>1,678</u> = Baseline Resolution Rate <u>65%</u> FY 2020-2021 Target Resolution Rate <u>70%</u></p>
<p>2. FY 2019-2020 Baseline Resolution Rate: Number of complaints partially or fully resolved <u>811</u> divided by the total number of complaints received <u>1,325</u> = Baseline Resolution Rate <u>61%</u> FY 2021-2022 Target Resolution Rate <u>70%</u></p>
<p>3. FY 2020 - 2021 Baseline Resolution Rate: Number of complaints partially or fully resolved <u>803</u> divided by the total number of complaints received <u>1,147</u> = Baseline Resolution Rate <u>70%</u> FY 2022-2023 Target Resolution Rate <u>60%</u></p>

<p>4. FY 2021-2022 Baseline Resolution Rate: Number of complaints partially or fully resolved _____ divided by the total number of complaints received _____ = Baseline Resolution Rate _____ % FY 2023-2024 Target Resolution Rate _____</p>
<p>Program Goals and Objective Numbers: _____</p>

B. Work with Resident Councils (NORS Elements S-64 and S-65)

<p>1. FY 2018-2019 Baseline: Number of Resident Council meetings attended <u>23</u> FY 2020-2021 Target: <u>5</u></p>
<p>2. FY 2019-2020 Baseline: Number of Resident Council meetings attended <u>6</u> FY 2021-2022 Target: <u>15</u></p>
<p>3. FY 2020-2021 Baseline: Number of Resident Council meetings attended <u>2</u> FY 2022-2023 Target: <u>6</u></p>
<p>4. _____ FY 2021-2022 Baseline: Number of Resident Council meetings attended ____ FY 2023-2024 Target: _____</p>
<p>Program Goals and Objective Numbers: _____</p>

C. Work with Family Councils (NORS Elements S-66 and S-67)

<p>1. FY 2018-2019 Baseline: Number of Family Council meetings attended <u>20</u> FY 2020-2021 Target: <u>5</u></p>
<p>2. _____ FY 2019-2020 Baseline: Number of Family Council meetings attended <u>11</u> FY 2021-2022 Target: <u>15</u></p>
<p>3. FY 2020-2021 Baseline: Number of Family Council meetings attended <u>5</u> FY 2022-2023 Target: <u>5</u></p>
<p>4. FY 2021-2022 Baseline: Number of Family Council meetings attended _____ FY 2023-2024 Target: _____</p>
<p>Program Goals and Objective Numbers: _____</p>

D. Information and Assistance to Facility Staff (NORS Elements S-53 and S-54) Count of instances of Ombudsman representatives' interactions with facility staff for the purpose of providing general information and assistance unrelated to a complaint. Information and Assistance may be accomplished by telephone, letter, email, fax, or in-person.

<p>1. FY 2018-2019 Baseline: Number of Instances <u>287</u> FY 2020-2021 Target: <u>500</u></p>
<p>2. FY 2019-2020 Baseline: Number of Instances <u>419</u> FY 2021-2022 Target: <u>450</u></p>
<p>3. FY 2020-2021 Baseline: Number of Instances <u>333</u> FY 2022-2023 Target: <u>450</u></p>
<p>4. FY 2021-2022 Baseline: Number of Instances _____ FY 2023-2024 Target: _____</p>
<p>Program Goals and Objective Numbers: _____</p>

E. Information and Assistance to Individuals (NORS Element S-55) Count of instances of Ombudsman representatives' interactions with residents, family members, friends, and others in the community for the purpose of providing general information and assistance unrelated to a complaint. Information and Assistance may be accomplished by: telephone, letter, email, fax, or in person.

1. FY 2018-2019 Baseline: Number of Instances <u>993</u> FY 2020-2021 Target: <u>1,200</u>
2. FY 2019-2020 Baseline: Number of Instances <u>702</u> FY 2021-2022 Target: <u>850</u>
3. FY 2020-2021 Baseline: Number of Instances <u>365</u> FY 2022-2023 Target: <u>500</u>
4. FY 2021-2022 Baseline: Number of Instances _____ FY 2023-2024 Target: _____
Program Goals and Objective Numbers: _____

F. Community Education (NORS Element S-68) LTC Ombudsman Program participation in public events planned to provide information or instruction to community members about the LTC Ombudsman Program or LTC issues. The number of sessions refers to the number of events, not the number of participants. This cannot include sessions that are counted as Public Education Sessions under the Elder Abuse Prevention Program.

1. FY 2018-2019 Baseline: Number of Sessions <u>10</u> FY 2020-2021 Target: <u>10</u>
2. FY 2019-2020 Baseline: Number of Sessions <u>0</u> FY 2021-2022 Target: <u>10</u>
3. FY 2020-2021 Baseline: Number of Sessions <u>2</u> FY 2022-2023 Target: <u>4</u>
4. FY 2021-2022 Baseline: Number of Sessions _____ FY 2023-2024 Target: _____
Program Goals and Objective Numbers: _____

G. Systems Advocacy (NORS Elements S-07, S-07.1)

One or more new systems advocacy efforts must be provided for each fiscal year Area Plan Update. In the relevant box below for the current Area Plan year, in narrative format, please provide at least one new priority systems advocacy effort the local LTC Ombudsman Program will engage in during the fiscal year. The systems advocacy effort may be a multi-year initiative, but for each year, describe the results of the efforts made during the previous year and what specific new steps the local LTC Ombudsman program will be taking during the upcoming year. Progress and goals must be separately entered each year of the four-year cycle in the appropriate box below.

Systems Advocacy can include efforts to improve conditions in one LTC facility or can be county-wide, state-wide, or even national in scope. (Examples: Work with LTC facilities to improve pain relief or increase access to oral health care, work with law enforcement entities to improve response and investigation of abuse complaints, collaboration with other agencies to improve LTC residents' quality of care and quality of life, participation in disaster preparedness planning, participation in legislative advocacy efforts related to LTC issues, etc.) Be specific about the actions planned by the local LTC Ombudsman Program. Enter information in the relevant box below.

FY 2020-2021
FY 2020-2021 Systems Advocacy Effort(s): The LTC Ombudsman Program will work with the Terracina Post-Acute facility to improve LTC residents' quality of care and quality of life. Responsibility will include identifying most common complains and/or care issues affecting the residents and work to improve those issues for the benefit of residents.
FY 2021-2022
Outcome of FY 2020-2021 Efforts: Field Coordinator was able to work with Terracina Post-Acute until COVID safety restrictions.
FY 2021-2022 Systems Advocacy Effort(s): The Ombudsman Program will collaborate with various San Bernardino partners for disaster preparedness training for the Ombudsman Volunteers. Emphasis will be on actions specific to facilities during a disaster event and how the volunteers can assist in that environment.
FY 2022-2023
Outcome of FY 2021-2022 Efforts: The pandemic has also forced Long-Term Care residents to be isolated from their families. The Ombudsman program implemented virtual visits with patients and families. These virtual visits have a 50% success rate.
FY 2022-2023 Systems Advocacy Effort(s): The Ombudsman Program will develop relationships with the regulatory enforcement agencies for Residential Care Facilities (Department of Social Services Community Care Licensing) and for Skilled Nursing Facilities (California Department of Public Health). The outcome will be regular meetings to improve communication and conditions in long-term care facilities.
FY 2023-2024
Outcome of 2022-2023 Efforts:
FY 2023-2024 Systems Advocacy Effort(s): (Provide one or more new systems advocacy efforts)

Outcome 2. Residents have regular access to an Ombudsman. [(Older Americans Act Reauthorization Act of 2016), Section 712(a)(3)(D), (5)(B)(ii)]

Measures and Targets:

A. Routine Access: Nursing Facilities (NORS Element S-58) Number of nursing facilities within the PSA that were visited by an Ombudsman representative at least once each quarter **not** in response to a complaint. NOTE: This is not a count of *visits* but a count of *facilities*. In determining the number of facilities visited for this measure, no nursing facility can be counted more than once.

1. FY 2018-2019 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint **47** divided by the total number of Nursing Facilities **54** = Baseline **87%**

FY 2020-2021 Target: **87%**

2. FY 2019-2020 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint **0** divided by the total number of Nursing Facilities **56** = Baseline **0%**.

FY 2021-2022 Target: **60%**

3. FY 2020-2021 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint **0** divided by the number of Nursing Facilities **79** = Baseline **0%**

FY 2022-2023 Target: **50%**

4. FY 2021-2022 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint _____

FY 2023-2024 Target: _____

Program Goals and Objective Numbers: _____

B. Routine access: Residential Care Communities (NORS Element S-61) Number of RCFEs within the PSA that were visited by an Ombudsman representative at least once each quarter during the fiscal year **not** in response to a complaint. NOTE: This is not a count of *visits* but a count of *facilities*. In determining the number of facilities visited for this measure, no RCFE can be counted more than once.

<p>1. FY 2018-2019 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint <u>110</u> divided by the total number of RCFEs <u>246</u> = Baseline <u>45%</u></p> <p>FY 2020-2021 Target: <u>65%</u></p>
<p>2. FY 2019-2020 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint <u>0</u> divided by the total number of RCFEs <u>251</u> = Baseline <u>0%</u></p> <p>FY 2021-2022 Target: <u>0%</u></p>
<p>3. FY 2020-2021 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint <u>0</u> divided by the total number of RCFEs <u>251</u>=Baseline <u>0%</u></p> <p>FY 2022-2023 Target: <u>50%</u></p>
<p>4. FY 2021-2022 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint _____</p> <p>FY 2023-2024 Target: _____</p>
<p>Program Goals and Objective Numbers: _____</p>

C. Number of Full-Time Equivalent (FTE) Staff (NORS Element S-23) This number may only include staff time legitimately charged to the LTC Ombudsman Program. Time spent working for or in other programs may not be included in this number. For example, in a local LTC Ombudsman Program that considers full-time employment to be 40 hour per week, the FTE for a staff member who works in the Ombudsman Program 20 hours a week should be 0.5, even if the staff member works an additional 20 hours in another program.

<p>1. FY 2018-2019 Baseline: <u>6.55</u> FTEs FY 2020-2021 Target: <u>6.55</u> FTEs</p>
<p>2. FY 2019-2020 Baseline: <u>6.33</u> FTEs FY 2021-2022 Target: <u>6.33</u> FTEs</p>
<p>3. FY 2020-2021 Baseline: <u>6.79</u> FTEs FY 2022-2023 Target: <u>6</u> FTEs</p>
<p>4. FY 2021-2022 Baseline: _____ FTEs FY 2023-2024 Target: _____ FTEs</p>
<p>Program Goals and Objective Numbers: _____</p>

D. Number of Certified LTC Ombudsman Volunteers (NORS Element S-24)

1. FY 2018-2019 Baseline: Number of certified LTC Ombudsman volunteers <u>28</u> FY 2020-2021 Projected Number of certified LTC Ombudsman volunteers <u>25</u>
2. FY 2019-2020 Baseline: Number of certified LTC Ombudsman volunteers <u>11</u> FY 2021-2022 Projected Number of certified LTC Ombudsman volunteers <u>11</u>
3. FY 2020-2021 Baseline: Number of certified LTC Ombudsman volunteers <u>9</u> FY 2022-2023 Projected Number of certified LTC Ombudsman volunteers <u>5</u>
4. FY 2021-2022 Baseline: Number of certified LTC Ombudsman volunteers _____ FY 2023-2024 Projected Number of certified LTC Ombudsman volunteers _____
Program Goals and Objective Numbers: _____

Outcome 3. Ombudsman representatives accurately and consistently report data about their complaints and other program activities in a timely manner. [Older Americans Act Reauthorization Act of 2016, Section 712(c)]

Measures and Targets:

In the box below, in narrative format, describe one or more specific efforts your program will undertake in the upcoming year to increase the accuracy, consistency, and timeliness of your National Ombudsman Reporting System (NORS) data reporting.

Some examples could include:

- Hiring additional staff to enter data
- Updating computer equipment to make data entry easier
- Initiating a case review process to ensure case entry is completed in a timely manner

- | |
|---|
| <ul style="list-style-type: none">• All staff will be trained to enter data in real time into the Ombudsman Data Integration System (ODIN).• All current staff will be trained on NORS coding, and documentation principles. All new ombudsman staff and volunteers will be required to train on ODIN and NORS as part of the Ombudsman Certification training process.• Program Coordinator will conduct case reviews throughout each month to ensure accuracy and completeness of records and data collected. |
|---|

TITLE VIIA ELDER ABUSE PREVENTION SERVICE UNIT PLAN OBJECTIVES

The program conducting the Title VIIA Elder Abuse Prevention work is:

<input checked="" type="checkbox"/>	Ombudsman Program
<input type="checkbox"/>	Legal Services Provider
<input type="checkbox"/>	Adult Protective Services
<input type="checkbox"/>	Other (explain/list)

Units of Service: AAA must complete at least one category from the Units of Service below.

Units of Service categories include public education sessions, training sessions for professionals, training sessions for caregivers served by a Title III E Family Caregiver Support Program, educational materials distributed, and hours of activity spent developing a coordinated system which addresses elder abuse prevention, investigation, and prosecution.

When developing targets for each fiscal year, refer to data reported on the Elder Abuse Prevention Quarterly Activity Reports. Set realistic goals based upon the prior year's numbers and the resources available. Activities reported for the Title VII Elder Abuse Prevention Program must be distinct from activities reported for the LTC Ombudsman Program. No activity can be reported for both programs.

AAAs must provide one or more of the service categories below.

NOTE: The number of sessions refers to the number of presentations and not the number of attendees

- **Public Education Sessions** –Indicate the total number of projected education sessions for the general public on the identification, prevention, and treatment of elder abuse, neglect, and exploitation.

- **Training Sessions for Professionals** –Indicate the total number of projected training sessions for professionals (service providers, nurses, social workers) on the identification, prevention, and treatment of elder abuse, neglect, and exploitation.
- **Training Sessions for Caregivers Served by Title III E** –Indicate the total number of projected training sessions for unpaid family caregivers who are receiving services under Title III E of the Older Americans Act (OAA) on the identification, prevention, and treatment of elder abuse, neglect, and exploitation. Older Americans Act Reauthorization Act of 2016, Section 302(3) ‘Family caregiver’ means an adult family member, or another individual, who is an informal provider of in-home and community care to an older individual or to an individual with Alzheimer’s disease or a related disorder with neurological and organic brain dysfunction.
- **Hours Spent Developing a Coordinated System to Respond to Elder Abuse** –Indicate the number of hours to be spent developing a coordinated system to respond to elder abuse. This category includes time spent coordinating services provided by the AAA or its contracted service provider with services provided by Adult Protective Services, local law enforcement agencies, legal services providers, and other agencies involved in the protection of elder and dependent adults from abuse, neglect, and exploitation.
- **Educational Materials Distributed** –Indicate the type and number of educational materials to be distributed to the general public, professionals, and caregivers (this may include materials that have been developed by others) to help in the identification, prevention, and treatment of elder abuse, neglect, and exploitation.
- **Number of Individuals Served** –Indicate the total number of individuals expected to be reached by any of the above activities of this program.

TITLE VIIA ELDER ABUSE PREVENTION SERVICE UNIT PLAN OBJECTIVES

The agency receiving Title VIIA Elder Abuse Prevention funding is:

Long Term Care Ombudsman Program
Department of Aging and Adult Services
San Bernardino County

Fiscal Year	Total # of Public Education Sessions
2020-2021	45
2021-2022	35
2022-2023	10
2023-2024	

Fiscal Year	Total # of Training Sessions for Professionals
2020-2021	45
2021-2022	35
2022-2023	8
2023-2024	

Fiscal Year	Total # of Training Sessions for Caregivers served by Title III E
2020-2021	
2021-2022	
2022-2023	
2023-2024	

Fiscal Year	Total # of Hours Spent Developing a Coordinated System
2020-2021	40
2021-2022	40
2022-2023	40
2023-2024	

Fiscal Year	Total # of Copies of Educational Materials to be Distributed	Description of Educational Materials
2020-2021	1,850	Brochures for the elder abuse prevention program
2021-2022	1,730	Brochures for the elder abuse prevention program
2022-2023	1,500	Elder Justice Resource Guides
2023-2024		

Fiscal Year	Total Number of Individuals Served
2020-2021	1,000
2021-2022	900
2022-2023	900
2023-2024	

TITLE III E SERVICE UNIT PLAN OBJECTIVES

CCR Article 3, Section 7300(d)

2020-2024 Four-Year Planning Period

This Service Unit Plan (SUP) uses the five broad federally mandated service categories. Refer to the CDA Service Categories and Data Dictionary for eligible activities and service unit measures. Specify proposed audience size or units of service for ALL budgeted funds.

Direct and/or Contracted III E Services

CATEGORIES	1	2	3
Family Caregiver Services	<i>Proposed</i> Units of Service	<i>Required</i> Goal #(s)	<i>Optional</i> Objective #(s)
Caregivers of Older Adults			
Information Services	# of activities and Total est. audience for above		
2020-2021	# of activities: 300 Total est. audience for above: 3,000	2	
2021-2022	# of activities: 300 Total est. audience for above: 3,000	2	
2022-2023	# of activities: 300 Total est. audience for above: 3,000	2	
2023-2024	# of activities: Total est. audience for above:		
Access Assistance	Total contacts		
2020-2021	15,075	2	
2021-2022	15,075	2	
2022-2023	15,075	2	
2023-2024			

Access Assistance	Total contacts		
Support Services	Total hours		
2020-2021	4,200	2	
2021-2022	4,200	2	
2022-2023	4,200	2	
2023-2024			
Respite Care	Total hours		
2020-2021	3,000	2	
2021-2022	3,000	2	
2022-2023	3,000	2	
2023-2024			
Supplemental Services	Total occurrences		
2020-2021	150	2	
2021-2022	150	2	
2022-2023	150	2	
2023-2024			

Direct and/or Contracted III E Services

Older Elderly Relative	Proposed Units of Service	Required Goal #(s)	Optional Objective #(s)
Information Services	# of activities and Total est. audience for above		
2020-2021	# of activities: 60 Total est. audience for above: 300	2	
2021-2022	# of activities: 60 Total est. audience for above: 300	2	
2022-2023	# of activities: 60 Total est. audience for above: 300	2	
2023-2024	# of activities: Total est. audience for above:		

Older Elderly Relative	<i>Proposed</i> Units of Service	<i>Required</i> Goal #(s)	<i>Optional</i> Objective #(s)
Access Assistance	Total contacts		
2020-2021	1,050	2	
2021-2022	1,050	2	
2022-2023	1,050	2	
2023-2024			
Support Services	Total hours		
2020-2021			
2021-2022			
2022-2023			
2023-2024			
Respite Care	Total hours		
2020-2021			
2021-2022			
2022-2023			
2023-2024			
Supplemental Services	Total occurrences		
2020-2021			
2021-2022			
2022-2023			
2023-2024			

HEALTH INSURANCE COUNSELING AND ADVOCACY PROGRAM (HICAP) SERVICE UNIT PLAN

CCR Article 3, Section 7300(d)

MULTIPLE PSA HICAPs: If you are a part of a multiple-PSA HICAP where two or more AAAs enter into an agreement with one “Managing AAA,” to deliver HICAP services on their behalf to eligible persons in their AAA, then each AAA is responsible for providing HICAP services in the covered PSAs in a way that is agreed upon and equitable among the participating parties.

HICAP PAID LEGAL SERVICES: Complete this section if your Master Contract contains a provision for using HICAP funds to provide HICAP Legal Services.

STATE & FEDERAL PERFORMANCE TARGETS: The Administration for Community Living (ACL) establishes targets for the State Health Insurance Assistance Program (SHIP)/HICAP performance measures (PMs). ACL introduced the current SHIP PMs in late 2016, and continues to manage the PMs in conjunction with the SHIP Annual Resource Report, used to inform Congress. The SHIP PMs are comprised of five (5) base elements, with one multi-layered category. The PMs are not used in performance-based funding scoring methodology, but instead are assessed to determine a Likert scale comparison model for setting National PM Targets that define the proportional penetration rates needed for statewide improvements.

Using ACL’s approach, CDA HICAP calculates State and Federal Performance Measures with goal-oriented targets for each AAA’s Planning and Service Area (PSA). The PMs are calculated at the county-level data, then displayed under each Planning Service Area. In general, the State and Federal Performance Measures include the following:

- PM 1.1 Clients Counseled ~ Number of finalized Intakes for clients/beneficiaries that received HICAP services
- PM 1.2 Public and Media Events (PAM) ~ Number of completed PAM forms categorized as “interactive” events
- PM 2.1 Client Contacts ~ Percentage of one-on-one interactions with any Medicare beneficiaries
- PM 2.2 PAM Outreach Contacts ~ Percentage of persons reached through events categorized as “interactive”
- PM 2.3 Medicare Beneficiaries Under 65 ~ Percentage of one-on-one interactions with Medicare beneficiaries under the age of 65
- PM 2.4 Hard-to-Reach Contacts ~ Percentage of one-on-one interactions with “hard-to-reach” Medicare beneficiaries designated as:
 - PM 2.4a Low-income (LIS)
 - PM 2.4b Rural
 - PM 2.4c English Second Language (ESL)
- PM 2.5 Enrollment Contacts ~ Percentage of contacts with one or more qualifying enrollment topics discussed

AAA's should demonstrate progress toward meeting or improving on the Performance requirements established by CDA and ACL as is displayed annually on the *HICAP State and Federal Performance Measures* tool located online at:

https://www.aging.ca.gov/Providers_and_Partners/Area_Agencies_on_Aging/#pp-planning.

(Reference CDA PM 17-11 for further discussion, including current HICAP Performance Measures and Definitions).

For current and future planning, CDA requires each AAA ensure that HICAP service units and related federal *Annual Resource Report* data are documented and verified complete/ finalized in CDA's Statewide HICAP Automated Reporting Program (SHARP) system per the existing contractual reporting requirements. HICAP Service Units do not need to be input in the Area Plan (with the exception of HICAP Paid Legal Services, where applicable).

HICAP Legal Services Units of Service (if applicable)

Fiscal Year (FY)	3.1 Estimated Number of Clients Represented Per FY (Unit of Service)	Goal Numbers
2020-2021		
2021-2022		
2022-2023		
2023-2024		

Fiscal Year (FY)	3.2 Estimated Number of Legal Representation Hours Per FY (Unit of Service)	Goal Numbers
2020-2021		
2021-2022		
2022-2023		
2023-2024		

Fiscal Year (FY)	3.3 Estimated Number of Program Consultation Hours Per FY (Unit of Service)	Goal Numbers
2020-2021		
2021-2022		
2022-2023		
2023-2024		

SECTION 12 - DISASTER PREPAREDNESS

PSA 20

Disaster Preparation Planning Conducted for the 2020-2024 Planning Cycle Older Americans Act Reauthorization Act of 2016, Section 306(a)(17); 310, CCR Title 22, Sections 7529 (a)(4) and 7547, W&I Code Division 8.5, Sections 9625 and 9716, CDA Standard Agreement, Exhibit E, Article 1, 22-25, Program Memo 10-29(P)

1. Describe how the AAA coordinates its disaster preparedness plans and activities with local emergency response agencies, relief organizations, state and local governments, and other organizations responsible for emergency preparedness and response as required in OAA, Title III, Section 310:
2. Identify each of the local Office of Emergency Services (OES) contact person(s) within the PSA that the AAA will coordinate with in the event of a disaster (add additional information as needed for each OES within the PSA):

Name	Title	Telephone	email
Brent Martin	Emergency Services Manager	Office: 909-356-3918 Mobile: 909-677-5709	Brent.martin@OES.sbcounty.gov

3. Identify the Disaster Response Coordinator within the AAA:

Name	Title	Telephone	email
Christopher Tarr	Deputy Director	Office: 760-243-8489 Mobile: 760-401-1353	ctarr@hss.sbcounty.gov

4. List critical services the AAA will continue to provide after a disaster and describe how these services will be delivered:

Critical Services	How Delivered?
Check on most vulnerable clients	Program staff has disaster contact sheets used to document if the client has a live-in care provider or not, is on oxygen, is bed bound, etc. The most dependent clients are contacted during a disaster
Coordinate with first responders	Department Disaster Coordinators assigned to each facility will conduct a self-assessment of the staff, visitors, and facility and report back to DOC.
Investigate Adult Protective Services reports	Deputy Directors will supervise and coordinate relief efforts in their respective regions as well as specific activities based on their assignments.

5. List any agencies with which the AAA has formal emergency preparation or response agreements.

California Fire Service and Rescue Emergency Mutual Aid System/Plan 4/2019; Operations Bulletin #1 Closest Resource Concept-Requesting Mutual Aid from Adjoining Operational Areas and Regions; California Disaster and Civil Defense Master Mutual Aid Agreement; Immediate Need Procedures AH-330 3-3 STL_TFL Response 2018; Multi-Agency Coordination System Publication Procedures Guide MACS 410-1 7/2018; Multi-Agency Coordination System Resource Designation System MACS 410-2 5/2013; California Fire Service and Rescue Emergency Mutual Aid System Orientation for the new Operational Area Coordinator 4/2019; ST-TF AH-330 3-3-3 Code of Conduct 7/2017

6. Describe how the AAA will:
 - i. Identify vulnerable populations.

Each program identifies vulnerable service populations by keeping disaster contact sheets numbered according to their needs assessment and whether there is a live-in care provider or not. The highest priority clients are those who do not have live-in help and who are dependent on oxygen or other durable medical equipment. Social Workers keep in touch with these high priority clients during any disaster.

- ii. Follow-up with these vulnerable populations after a disaster event.

The DAAS social workers keep in touch with high priority clients after any disaster.

2020-2024 Four-Year Planning Cycle

Funding for Access, In-Home Services, and Legal Assistance

The CCR, Article 3, Section 7312, requires the AAA to allocate an “adequate proportion” of federal funds to provide Access, In-Home Services, and Legal Assistance in the PSA. The annual minimum allocation is determined by the AAA through the planning process. The minimum percentages of applicable Title III B funds listed below have been identified for annual expenditure throughout the four-year planning period. These percentages are based on needs assessment findings, resources available within the PSA, and discussions at public hearings on the Area Plan.

Category of Service and the Percentage of Title III B Funds expended in/or to be expended in FY 2020-21 through FY 2023-2024

Access:

Transportation, Assisted Transportation, Case Management, Information and Assistance, Outreach, Comprehensive Assessment, Health, Mental Health, and Public Information

2020-21 40% 21-22 40% 22-23 40% 23-24 %

In-Home Services:

Personal Care, Homemaker, Chore, Adult Day / Health Care, Alzheimer's, Residential

2020-21 5% 21-22 5% 22-23 5% 23-24 %

Legal Assistance Required Activities

Legal Advice, Representation, Assistance to the Ombudsman Program and Involvement in the Private Bar

2020-21 10% 21-22 10% 22-23 10% 23-24 %

Explain how allocations are justified and how they are determined to be sufficient to meet the need for the service within the PSA. ____

SECTION 16 - GOVERNING BOARD

PSA 20

**GOVERNING BOARD MEMBERSHIP
2020-2024 Four-Year Area Plan Cycle**

CCR Article 3, Section 7302(a)(11)

Total Number of Board Members: **5**

Name and Title of Officers:

Office Term Expires:

Curt Hagman, Fourth District Supervisor	2022
Janice Rutherford, Second District Supervisor	2022
Col. Paul Cook (Ret.), First District Supervisor	2024
Dawn Rowe, Third District Supervisor	2024
Joe Baca, Jr., Fifth District Supervisor	2024

Names and Titles of All Members:

Board Term Expires:

Explain any expiring terms – have they been replaced, renewed, or other?

Two board members terms will be expiring this year. Elections will take place in November.

SECTION 17 - ADVISORY COUNCIL

PSA 20

**ADVISORY COUNCIL MEMBERSHIP
2020-2024 Four-Year Planning Cycle**

Older Americans Act Reauthorization Act of 2020 Section 306(a)(6)(D)
45 CFR, Section 1321.57
CCR Article 3, Section 7302(a)(12)

Total Council Membership (include vacancies) 21

Number of Council Members over age 60 10

	<u>% of PSA's 60+Population</u>	<u>% on Advisory Council</u>
Race/Ethnic Composition		
White	<u>71.3%</u>	<u>66.7%</u>
Hispanic	<u>30.2%</u>	<u>8.3%</u>
Black	<u>7.5%</u>	<u>16.7%</u>
Asian/Pacific Islander	<u>8.5%</u>	<u>0%</u>
Native American/Alaskan Native	<u>0.1%</u>	<u>0%</u>
Other	<u>9.5%</u>	<u>8.3%</u>

Name and Title of Officers:

Office Term Expires:

David Wilder, Chair, Executive Committee Chair, East Valley Regional Council on Aging, and California Senior Senator	RCA
Penny Shubnell, Vice Chair, Executive Committee Vice Chair, Mountain Regional Council on Aging, and Healthy Aging Chair	RCA
Sandra Bowen, Member at Large, Secretary	1/10/2023

Name and Title of other members:

Office Term Expires:

Gwen Alber, Nutrition Committee Chair, West Valley Regional Council on Aging	RCA
Maricela S. Ferguson, Legislative Committee Chair, Fifth District Appointee	12/2/2024
Heather Lopez, Victor Valley Regional Council on Aging	RCA
Deborah Nattress, PhD, Access Committee Chair, Third District Appointee	12/4/2023
Denise K. Benton, Intergenerational Committee Chair, Professional Appointee	12/4/2023
Priscilla Benadom, North Desert Regional Council on Aging	RCA
Joanne L. Lavello, Fourth District Appointee	12/4/2023
James S. Welte, First District Appointee	12/4/2023
Larry Grable, Second District Appointee	12/5/2022
Toni Stepetz, Morongo Basin Regional Council on Aging	RCA
Daniel Burke, At Large Appointee	1/10/2023
Ben Jauregui, Professional Appointee	12/4/2023
Linda Frost, Second District Appointee	12/4/2023
Arlington C. Rodgers, Jr., Fifth District Appointee	12/2/2024
Suzanne Yoakum, Fourth District Appointee, California Senior Assembly Member	12/5/2022

Indicate which member(s) represent each of the “Other Representation” categories listed below.

Yes No

- Low Income
- Representative Disabled
- Representative
- Supportive Services
- Provider Representative
- Health Care Provider
- Representative
- Family Caregiver
- Representative Local
- Elected Officials
- Individuals with Leadership Experience in Private and Voluntary Sectors

Explain any "No" answer(s): N/A

Explain any expiring terms – have they been replaced, renewed, or other?

Briefly describe the local governing board’s process to appoint Advisory Council members:

APPOINTED MEMBERS: 12 Members are appointed by the Board of Supervisors: 2 members from each supervisorial district and 2 members appointed at-large. The term of office of the appointed members shall be coterminous with the appointing supervisor; these shall be 4 years terms, expiring the first Monday of December in the appropriate year. The term of office of the at-large members shall be coterminous with the appointing Chairman of the Board; these shall be 2-year terms, expiring at the first Board of Supervisors meeting in January of the appropriate year.

PROFESSIONAL MEMBERS: At the recommendation of the Director of the Department of Aging, the Board of Supervisors may appoint up to 2 commissioners having relevant professional experience in fields including but not limited to: gerontology, social work, education, and banking or financial management. The term of office of the Professional Members shall be for 4 years.

REPRESENTATIVE MEMBERS: The chairs of the Regional Council on Aging (RCA) or a designated member shall serve on the commission. In the event 1 or more of the chairs of the RCA is already a member of the Commission, he/she may continue to serve in the position of his/her choice. The RCA shall designate a representative in the event the chair elects to serve on the Commission in another position. The term of the office of the chair elects to serve on the Commission in another position. The term of office of the representative members shall be coterminous with the term of office for the chairs of the RCA.

In no circumstances will any member occupy more than one seat on the Commission.

2020-2024 Four-Year Area Planning Cycle

This section must be completed and submitted annually. The Older Americans Act Reauthorization Act of 2020 designates legal assistance as a priority service under Title III B [42USC §3026(a)(2)]

CDA developed *California Statewide Guidelines for Legal Assistance* (Guidelines), which are to be used as best practices by CDA, AAAs and LSPs in the contracting and monitoring processes for legal services, and located at:

[https://aging.ca.gov/Providers and Partners/Legal Services/#pp-gg](https://aging.ca.gov/Providers_and_Partners/Legal_Services/#pp-gg)

7. Based on your local needs assessment, what percentage of Title IIIB funding is allocated to Legal Services? **Discuss:**

A minimum of 10% of IIIB funding is allocated to meet the need for Legal Services in San Bernardino County. This percentage was determined using data from the needs assessment as well as a five-year analysis of service and funding trends.

8. Specific to Legal Services, has there been a change in your local needs in the past four years? If so, please identify the change (include whether the change affected the level of funding and the difference in funding levels in the past four years). **Yes/No, Discuss:**

1. Yes, there has been a change in that more seniors are dealing with landlord/tenant issues, fraud, debt collection, estate planning, bankruptcies, and, divorce, custody, and grandparent rights.

2018/19	\$303,533
2019/20	\$266,100
2020/21	\$256,500
2021/22	\$193,794

9. Specific to Legal Services, does the AAA's contract/agreement with the Legal Services Provider(s) (LSPs) specify that the LSPs are expected to use the California Statewide Guidelines in the provision of OAA legal services? **Yes/No, Discuss:**

Yes.

10. Does the AAA collaborate with the Legal Services Provider(s) to jointly establish specific priority issues for legal services? If so, what are the top four (4) priority legal issues in your PSA? **Yes/No, Discuss:**

No, the goal is to serve every senior with their legal issue. The top four legal issues are:

1. Landlord/Tenant issues
2. Estate Planning/Wills/Trusts/Financial Powers of Attorney

- 3. Bankruptcy/Debt Collection
- 4. Divorce/Custody/Visitation/Support/Grandparent rights

11. Specific to Legal Services, does the AAA collaborate with the Legal Services Provider(s) to jointly identify the target population? **Yes/No, Discuss:**

No, but the Legal Services provider is aware of the targeted population. They respond to all requests for assistance regardless of the individual. Seniors who have low income, live in rural areas, are alone or at risk for victimization are priorities. Regular presence at senior citizen centers and outreach is scheduled; and client intake is done by appointment. Outreach includes urban, rural and desert areas as well as telephone intake for advising on routine legal matters.

12. Specific to Legal Services,³ what is the targeted senior population and mechanism for reaching targeted groups in your PSA? **Discuss:**

See 5.

13. How many legal assistance service providers are in your PSA? **Complete table below.**

Fiscal Year	# of Legal Assistance Services Providers
2020-2021	1
2021-2022	1
2022-2023	1
2023-2024	<i>Leave Blank until 2023</i>

³ For Information related to Legal Services, contact Jeremy A. Avila at 916 419-7500 or Jeremy.Avila@aging.ca.gov.

8. What methods of outreach are Legal Services Providers using? Discuss:

SIA promotes the program and refers legal concerns to the provider. The provider schedules regular client intake at senior citizen centers throughout the County. ICLS participates in senior community fairs and disseminates information to seniors. ICLS maintains a telephone listing in the yellow pages and also maintains a website: <http://www.inlandlegal.org>

9. What geographic regions are covered by each provider? Complete table below:

Fiscal Year	Name of Provider	Geographic Region covered
2020-2021	Inland Counties Legal Services	San Bernardino County
2021-2022	Inland Counties Legal Services	San Bernardino County
2022-2023	Inland Counties Legal Services	San Bernardino County
2023-2024	<i>Leave Blank until 2023</i>	<i>Leave Blank until 2023</i>

10. Discuss how older adults access Legal Services in your PSA and whether they can receive assistance remotely (e.g., virtual legal clinics, phone, U.S. Mail, etc.). Discuss:

Older adults are interviewed concerning their legal problems during outreach activities at senior citizen centers throughout the County. Those activities have been limited due to the current pandemic. Additionally, initial contact can be from the seniors reaching ICLS by telephone at 1-888-245-4257 or through their website at <https://www.inlandlegal.org/>. ICLS recently formed practice groups based on areas of expertise to better serve clients. ICLS has an intake unit that directly receives incoming phone calls. The intake specialist assists with the issue and forwards the call to the appropriate practice group based on the issue. There is no change to the types of cases, as outlined in the contract, that ICLS accepts.

ICLS has three branch offices located in the County of San Bernardino.

- San Bernardino
- Ontario
- Victorville

Appointments are also scheduled at branch offices. ICLS has bilingual staff (Spanish) who can interpret when needed in all three offices. In addition, senior advocates also speak Spanish.

Due to COVID, ICLS staff are primarily meeting with clients remotely either through phone or Zoom which slows the process but keeps clients and staff safe. The same full range of legal services are provided as when our offices have been open to the public. Staff meets

face-to-face only when absolutely necessary. ICLS is currently holding Unlawful Detainer (UD) Clinics (3 days per week); an Emergency Rental Assistance Program Clinic; a Small Claims Back Rent Clinic; a Low Income Taxpayer Clinic (in partnership with the Riverside County Law Library) and a Small Business Legal Clinic. ICLS' Consumer Rights Clinic (in partnership with the San Bernardino courts) is currently also done through Zoom.

11. Identify the major types of legal issues that are handled by the Title IIIB legal provider(s) in your PSA (please include new legal problem trends in your area). **Discuss:**

The top four legal issues are:

1. Landlord/Tenant issues
2. Estate Planning/Wills/Trusts/Financial Powers of Attorney
3. Bankruptcy/Debt Collection
4. Divorce/Custody/Visitation/Support/Grandparent rights

12. What are the barriers to accessing legal assistance in your PSA? Include proposed strategies for overcoming such barriers. **Discuss:**

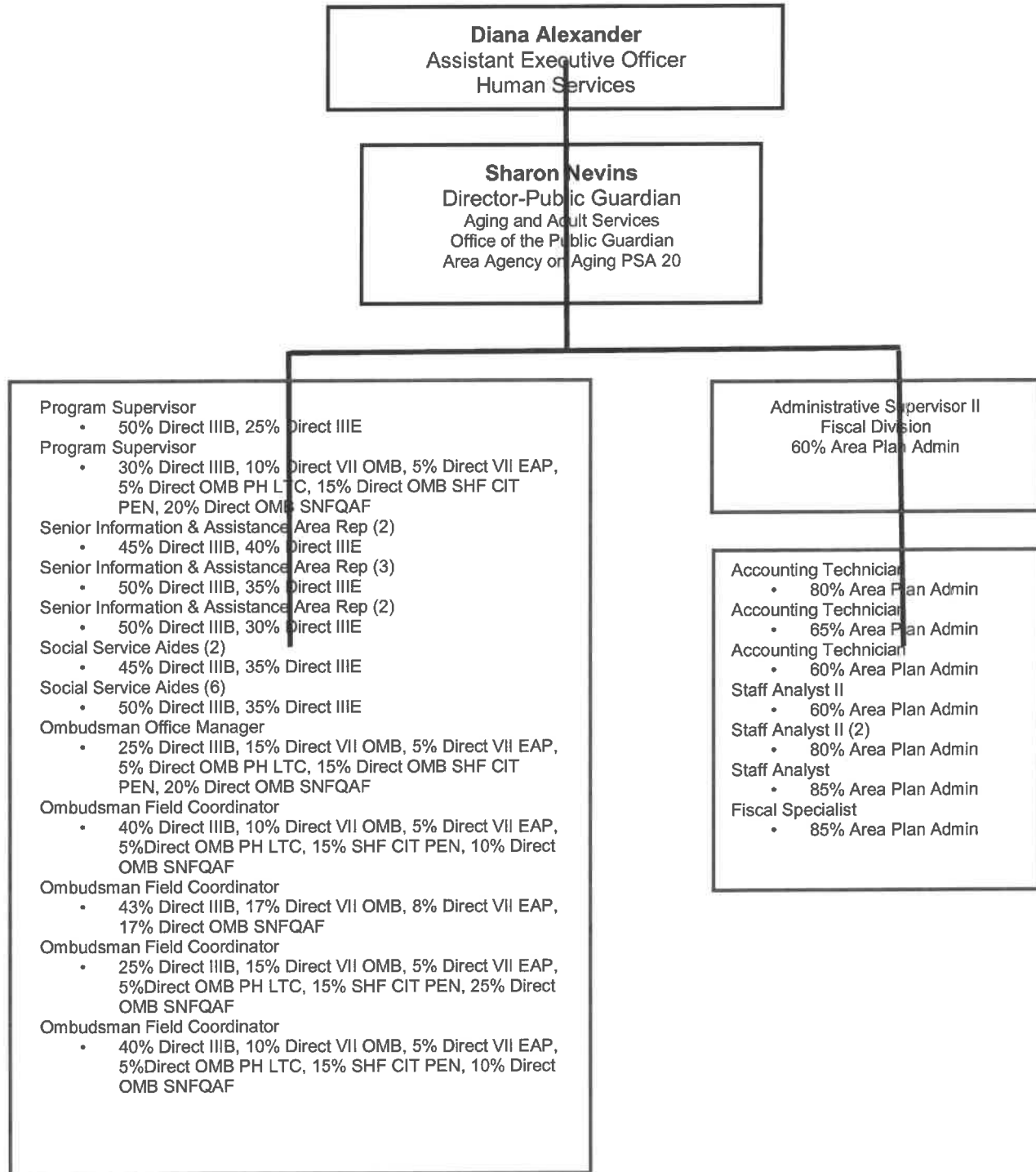
ICLS conducts "Needs Assessments" on a regular basis that is the basis of an annually adopted "Priorities in the Use of Resources" for the program. The Needs Assessment is an appraisal of the needs of the client community in the service area (San Bernardino and Riverside Counties) in consultation with the client community (current and potential), the ICLS Board of Directors, staff, the private bar and other interested persons.

13. What other organizations or groups does your legal service provider coordinate services with? **Discuss:**

As of January 2022, ICLS currently has collaborative relationships with the Superior Courts of both Riverside and San Bernardino counties; Coachella Valley Association of Governments; Step Up on Second; San Bernardino County "211"; San Bernardino County Behavioral Health Department; San Bernardino County Coordinated Entry System (CES); OneJustice; Riverside County Office on Aging; Rose M. Eldridge Senior Center; Moreno Valley Senior Center; Perris Senior Center; Lake Elsinore Senior Center; Kay Cisneros Senior Center; Banning Senior Center; Albert A. Chatigny Senior Community Recreation Center; San Jacinto Community Center; Desert Hot Springs Multi-Service Center; Redlands Community Senior Center; Scherer Senior Center in Yucaipa; Twentynine Palms Senior Center; Yucca Valley San Bernardino County Building; Montclair Community Center; Fontana Community Senior Center; Ontario Senior Center; Grace Vargas Senior Center; Barstow Senior Center; Lucerne Valley Outreach Center; Needles Housing Authority; Trona Senior Center; Bonnie Baker Senior Center; Legal Aid Society of San Diego; Riverside County Family Justice Centers; Riverside Area Rape Crisis Center; Desert Sanctuary/Haley House; U. S. Vets; City of Indio; California Department of Housing & Community Development and CASA/REACH the Valley Human Trafficking Victim Assistance Program.

SECTION 21 - ORGANIZATION CHART

PSA 20



SECTION 22 - ASSURANCES

Pursuant to the Older Americans Act Reauthorization Act of 2020, (OAA), the Area Agency on Aging assures that it will:

A. Assurances

1. OAA 306(a)(2)

Provide an adequate proportion, as required under Older Americans Act Reauthorization Act of 2016 Section 307(a)(2), of the amount allotted for part B to the planning and service area will be expended for the delivery of each of the following categories of services—

- (A) services associated with access to services (transportation, health services (including mental and behavioral health services) outreach, information and assistance, (which may include information and assistance to consumers on availability of services under part B and how to receive benefits under and participate in publicly supported programs for which the consumer may be eligible) and case management services);
- (B) in-home services, including supportive services for families of older individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction; and
- (C) legal assistance; and assurances that the area agency on aging will report annually to the State agency in detail the amount of funds expended for each such category during the fiscal year most recently concluded;

2. OAA 306(a)(4)(A)(i)(I-II)

(I) provide assurances that the area agency on aging will -

- (aa) set specific objectives, consistent with State policy, for providing services to older individuals with greatest economic need, older individuals with greatest social need, and older individuals at risk for institutional placement;
- (bb) include specific objectives for providing services to low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas; and;

(II) include proposed methods to achieve the objectives described in (aa) and (bb) of subclause (I);

3. OAA 306(a)(4)(A)(ii)

Include in each agreement made with a provider of any service under this title, a requirement that such provider will—

- (I) specify how the provider intends to satisfy the service needs of low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas in the area served by the provider;
- (II) to the maximum extent feasible, provide services to low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas in accordance with their need for such services; and
- (III) meet specific objectives established by the area agency on aging, for providing services to low-income minority individuals, older individuals with limited English

proficiency, and older individuals residing in rural areas within the planning and service area;

4. OAA 306(a)(4)(A)(iii)

With respect to the fiscal year preceding the fiscal year for which such plan is prepared—

(I) identify the number of low-income minority older individuals in the planning and service area;

(II) describe the methods used to satisfy the service needs of such minority older individuals; and

(III) provide information on the extent to which the area agency on aging met the objectives described in assurance number 2.

5. OAA 306(a)(4)(B)

Use outreach efforts that —

(i) identify individuals eligible for assistance under this Act, with special emphasis on—

(I) older individuals residing in rural areas;

(II) older individuals with greatest economic need (with particular attention to low-income minority individuals and older individuals residing in rural areas);

(III) older individuals with greatest social need (with particular attention to low-income minority individuals and older individuals residing in rural areas);

(IV) older individuals with severe disabilities;

(V) older individuals with limited English proficiency;

(VI) older individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals); and

(VII) older individuals at risk for institutional placement, specifically including survivors of the Holocaust; and

(ii) inform the older individuals referred to in sub-clauses (I) through (VII) of clause (i), and the caretakers of such individuals, of the availability of such assistance;

6. OAA 306(a)(4)(C)

Contain an assurance that the Area Agency on Aging will ensure that each activity undertaken by the agency, including planning, advocacy, and systems development, will include a focus on the needs of low-income minority older individuals and older individuals residing in rural areas;

7. OAA 306(a)(5)

Provide assurances that the Area Agency on Aging will coordinate planning, identification, assessment of needs, and provision of services for older individuals with disabilities, with particular attention to individuals with severe disabilities, and individuals at risk for institutional placement with agencies that develop or provide services for individuals with disabilities;

8. OAA 306(a)(9)(A)-(B)

(A) Provide assurances that the Area Agency on Aging, in carrying out the State Long-Term

Care Ombudsman program under 307(a)(9), will expend not less than the total amount of funds appropriated under this Act and expended by the agency in fiscal year 2019 in carrying out such a program under this title;

(B) funds made available to the Area Agency on Aging pursuant to section 712 shall be used to supplement and not supplant other Federal, State, and local funds expended to support activities described in section 712;

9. OAA 306(a)(11)

Provide information and assurances concerning services to older individuals who are Native Americans (referred to in this paragraph as “older Native Americans”), including—

(A) information concerning whether there is a significant population of older Native Americans in the planning and service area and if so, an assurance that the area agency on aging will pursue activities, including outreach, to increase access of those older Native Americans to programs and benefits provided under this title;

(B) An assurance that the Area Agency on Aging will to the maximum extent practicable, coordinate the services the agency provides under this title with services provided under title VI; and

(C) An assurance that the Area Agency on Aging will make services under the area plan available, to the same extent as such services are available to older individuals within the planning and service area, to older Native Americans.

10. OAA 306(a)(13)(A-E)

(A) maintain the integrity and public purpose of services provided, and service providers, under this title in all contractual and commercial relationships;

(B) disclose to the Assistant Secretary and the State agency—

(i) the identity of each nongovernmental entity with which such agency has a contract or commercial relationship relating to providing any service to older individuals; and

(ii) the nature of such contract or such relationship;

(C) demonstrate that a loss or diminution in the quantity or quality of the services provided, or to be provided, under this title by such agency has not resulted and will not result from such contract or such relationship;

(D) demonstrate that the quantity or quality of the services to be provided under this title by such agency will be enhanced as a result of such contract or such relationship; and

(E) on the request of the Assistant Secretary or the State, for the purpose of monitoring compliance with this Act (including conducting an audit), disclose all sources and expenditures of funds such agency receives or expends to provide services to older individuals;

11. 306(a)(14)

Provide assurances that preference in receiving services under this Title will not be given by the Area Agency on Aging to particular older individuals as a result of a contract or commercial relationship that is not carried out to implement this title;

12. 306(a)(15)

Provide assurances that funds received under this title will be used—

- (A) to provide benefits and services to older individuals, giving priority to older individuals identified in Section 306(a)(4)(A)(i); and
- (B) in compliance with the assurances specified in Section 306(a)(13) and the limitations specified in Section 212;

13: OAA 305(c)(5)

In the case of a State specified in subsection (b)(5), the State agency shall provide assurance, determined adequate by the State agency, that the Area Agency on Aging will have the ability to develop an area plan and to carry out, directly or through contractual or other arrangements, a program in accordance with the plan within the planning and service area.

14. OAA 307(a)(7)(B)

(B)

- (i) no individual (appointed or otherwise) involved in the designation of the State agency or an Area Agency on Aging, or in the designation of the head of any subdivision of the State agency or of an Area Agency on Aging, is subject to a conflict of interest prohibited under this Act;
- (ii) no officer, employee, or other representative of the State agency or an Area Agency on Aging is subject to a conflict of interest prohibited under this Act; and
- (iii) mechanisms are in place to identify and remove conflicts of interest prohibited under this Act.

15. OAA 307(a)(11)(A)

- (i) enter into contracts with providers of legal assistance, which can demonstrate the experience or capacity to deliver legal assistance;
- (ii) include in any such contract provisions to assure that any recipient of funds under division (i) will be subject to specific restrictions and regulations promulgated under the Legal Services Corporation Act (other than restrictions and regulations governing eligibility for legal assistance under such Act and governing membership of local governing boards) as determined appropriate by the Assistant Secretary; and
- (iii) attempt to involve the private bar in legal assistance activities authorized under this title, including groups within the private bar furnishing services to older individuals on a pro bono and reduced fee basis.

16. OAA 307(a)(11)(B)

That no legal assistance will be furnished unless the grantee administers a program designed to provide legal assistance to older individuals with social or economic need and has agreed, if the grantee is not a Legal Services Corporation project grantee, to coordinate its services with existing Legal Services Corporation projects in the planning and service area in order to concentrate the use of funds provided under this title on individuals with the greatest such need; and the Area Agency on Aging makes a finding, after assessment, pursuant to standards for service promulgated by the Assistant Secretary, that any grantee selected is the entity best able to provide the particular services.

17. OAA 307(a)(11)(D)

To the extent practicable, that legal assistance furnished under the plan will be in addition to any legal assistance for older individuals being furnished with funds from sources other than this Act and that reasonable efforts will be made to maintain existing levels of legal

assistance for older individuals; and

18. OAA 307(a)(11)(E)

Give priority to legal assistance related to income, health care, long-term care, nutrition, housing, utilities, protective services, defense of guardianship, abuse, neglect, and age discrimination.

19. OAA 307(a)(12)(A)

Any Area Agency on Aging, in carrying out such services will conduct a program consistent with relevant State law and coordinated with existing State adult protective service activities for -

- (i) public education to identify and prevent abuse of older individuals;
- (ii) receipt of reports of abuse of older individuals;
- (iii) active participation of older individuals participating in programs under this Act through outreach, conferences, and referral of such individuals to other social service agencies or sources of assistance where appropriate and consented to by the parties to be referred; and
- (iv) referral of complaints to law enforcement or public protective service agencies where appropriate.

20. OAA 307(a)(15)

If a substantial number of the older individuals residing in any planning and service area in the State are of limited English-speaking ability, then the State will require the Area Agency on Aging for each such planning and service area -

(A) To utilize in the delivery of outreach services under Section 306(a)(2)(A), the services of workers who are fluent in the language spoken by a predominant number of such older individuals who are of limited English-speaking ability.

(B) To designate an individual employed by the Area Agency on Aging, or available to such Area Agency on Aging on a full-time basis, whose responsibilities will include:

- (i) taking such action as may be appropriate to assure that counseling assistance is made available to such older individuals who are of limited English-speaking ability in order to assist such older individuals in participating in programs and receiving assistance under this Act; and
- (ii) providing guidance to individuals engaged in the delivery of supportive services under the area plan involved to enable such individuals to be aware of cultural sensitivities and to take into account effective linguistic and cultural differences.

21. OAA 307(a)(18)

Conduct efforts to facilitate the coordination of community-based, long-term care services, pursuant to Section 306(a)(7), for older individuals who -

- (A) reside at home and are at risk of institutionalization because of limitations on their ability to function independently;
- (B) are patients in hospitals and are at risk of prolonged institutionalization; or
- (C) are patients in long-term care facilities, but who can return to their homes if community-based services are provided to them.

22. OAA 307(a)(26)

Area Agencies on Aging will provide, to the extent feasible, for the furnishing of services under this Act, consistent with self-directed care.

B. Code of Federal Regulations (CFR), Title 45 Requirements:

23. CFR [1321.53(a)(b)]

(a) The Older Americans Act intends that the area agency on aging shall be the leader relative to all aging issues on behalf of all older persons in the planning and service area.

This means that the area agency shall proactively carry out, under the leadership and direction of the State agency, a wide range of functions related to advocacy, planning, coordination, inter-agency linkages, information sharing, brokering, monitoring and evaluation, designed to lead to the development or enhancement of comprehensive and coordinated community based systems in, or serving, each community in the Planning and Service Area. These systems shall be designed to assist older persons in leading independent, meaningful and dignified lives in their own homes and communities as long as possible.

(b) A comprehensive and coordinated community-based system described in paragraph (a) of this section shall:

(1) Have a visible focal point of contact where anyone can go or call for help, information or referral on any aging issue;

(2) Provide a range of options;

(3) Assure that these options are readily accessible to all older persons: The independent, semi-dependent and totally dependent, no matter what their income;

(4) Include a commitment of public, private, voluntary and personal resources committed to supporting the system;

(5) Involve collaborative decision-making among public, private, voluntary, religious and fraternal organizations and older people in the community;

(6) Offer special help or targeted resources for the most vulnerable older persons, those in danger of losing their independence;

(7) Provide effective referral from agency to agency to assure that information or assistance is received, no matter how or where contact is made in the community;

(8) Evidence sufficient flexibility to respond with appropriate individualized assistance, especially for the vulnerable older person;

(9) Have a unique character which is tailored to the specific nature of the community;

(10) Be directed by leaders in the community who have the respect, capacity and authority necessary to convene all interested persons, assess needs, design solutions, track overall success, stimulate change and plan community responses for the present and for the future.

24. CFR [1321.53(c)]

The resources made available to the Area Agency on Aging under the Older Americans Act are to be used to finance those activities necessary to achieve elements of a community based system set forth in paragraph (b) of this section.

25. CFR [1321.53(c)]

Work with elected community officials in the planning and service area to designate one or more focal points on aging in each community, as appropriate.

26. CFR [1321.53(c)]

Assure that services financed under the Older Americans Act in, or on behalf of, the community will be either based at, linked to or coordinated with the focal points designated.

27. CFR [1321.53(c)]

Assure access from designated focal points to services financed under the Older Americans Act.

CFR [1321.53(c)]

Work with, or work to assure that community leadership works with, other applicable agencies and institutions in the community to achieve maximum collocation at, coordination with or access to other services and opportunities for the elderly from the designated community focal points.

28. CFR [1321.61(b)(4)]

Consult with and support the State's long-term care ombudsman program.

29. CFR [1321.61(d)]

No requirement in this section shall be deemed to supersede a prohibition contained in the Federal appropriation on the use of Federal funds to lobby the Congress; or the lobbying provision applicable to private nonprofit agencies and organizations contained in OMB Circular A-122.

30. CFR [1321.69(a)]

Persons age 60 and older who are frail, homebound by reason of illness or incapacitating disability, or otherwise isolated, shall be given priority in the delivery of services under this part.